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Billing A CMS 1500 With Multiple Claim Lines

Providers submitting paper CMS 1500 claims should be aware of the following guidelines when billing multiple claim lines.

When billing on paper, providers may have more than six services that they will need to bill on the same claim. Medicaid does not allow for more than six claim lines on a CMS 1500 claim form.

For this type of situation, providers will need to follow the guidelines below.

- Enter the first five services on the first five claim lines as an ordinary claim.
- On the sixth line, use a related Unlisted Procedure code (NOC).
- Charges for line 6F will be the total of the excess codes.
- Enter "See attached documentation" in box 19.
- Include a copy of the operative report.
- Behind the claim, include on a separate sheet of paper, a listing of the procedures that were excessive and were replaced with the NOC code.

MDCH does not encourage providers to bill on paper claim forms. Currently, it is taking 6 to 8 months for a paper claim form to appear on a remittance advice after submission. Submitting electronic 837 Professional claim format allows for up to 50 service lines per claim. Billing electronically has a turn-around time of 10 to 14 days. On a multiple claim line claim, electronic bills can accommodate all the procedures rendered without having to combine services to an NOC code and attaching operative reports for additional review. As you can see, Electronic Billing will help to resolve many billing issues.

If you have any questions on billing, please contact our Provider Inquiry Unit at 1-800-292-2550 or ProviderSupport@michigan.gov . For questions regarding electronic vendors in your area, check our website www.michigan.gov/mdch >> Providers >> Providers >> Medicaid >> Billing and Reimbursement >> Electronic Billing.

New Policy Bulletins

The bulletins below were published during the previous month. It is very important that all providers are aware of new Policy Bulletins that are published. All applicable Policy Bulletins will be incorporated into the new quarter of the on-line updated Medicaid Manual. To view the new policy bulletins online you can visit www.michigan.gov/mdch >>Providers>>Providers>>Medicaid >> Policy and Forms. If you have any questions on the Policy Bulletins above, please contact Provider Inquiry at 1-800-292-2550 or ProviderSupport@michigan.gov.

Issue Date	Bulletin Number	Subject
March 1, 2008	MSA 08-16	Update to the Medicaid Access to Care Initiative (MACI) Payment Schedule
March 1, 2008	MSA 08-15	Updates to the Medicaid Provider Manual
March 1, 2008	MSA 08-14	Sanctioned Provider List
March 1, 2008	MSA 08-13	Provider Enrollment Changes
March 1, 2008	MSA 08-12	MDCH CHAMPS Web Page Re-Design
March 1, 2008	MSA 08-11	New Place of Service Code for Temporary Lodging; Clarification of Claim Completion for Service Facility Location; Claim Reporting Requirements for the Provider Tax Identification Number
March 1, 2008	MSA 08-10	Clarification of Medicaid Wheelchair Coverage Policy for Nursing Facility Residents
March 1, 2008	MSA 08-08	Policy Revision for Osteogenesis Stimulators
March 1, 2008	MSA 08-07	Elimination of Unit Dose Fee Reimbursement





CHAMPS Provider Enrollment has ARRIVED!

The time is finally here for the first stage of the CHAMPS system to be implemented. If you haven't already noticed stage one, CHAMPS Provider Enrollment was turned on for provider use on March 31st. The Provider Enrollment system is now ready for you to complete New Enrollments and also begin the Revalidation process.

Since this is an entirely new online Provider Enrollment system, MDCH has put together a series of resources to aid you in the new enrollment system. These resources will help you complete a New Enrollment application, complete a Revalidation application, help you manage or make changes to your Provider Record once your application has been approved, and more. A complete list of resources can be found at www.michigan.gov/mdch >> Providers >> Providers >> CHAMPS.

Below are a couple of highlighted materials that are posted for your reference:

Webinars- are video tutorials that give you a step by step walk through on how to complete a New Enrollment application and Revalidation application. These webinars are specific to enrollment types and application types. Also, within the webinar library is a tutorial for registering and using the Single Sign-On (SSO) system and how to issue security levels or domain access to additional employees within your organization.

User Guides- The User Guides are detailed step by step instruction manuals on how to navigate through the CHAMPS Provider Enrollment system for all Enrollment Types. These manuals will include written instructions as well as screen shots to guide you through the enrollment process and the management of your Provider Record.

Quick Reference Guides- These Quick Reference Guides are a short summary of the User Guides. They will help you step by step through the enrollment process for all enrollment and application types. Quick Reference guides outline the user guides to a 4-5 page document for those that are looking for quick instructions to move along to the next step.

Besides the resources listed above, there are others that are available to make this new Provider Enrollment system easier to use. Again, a full list of these resources and training sessions can be found at www.michigan.gov/mdch > Providers >> CHAMPS.

Medicaid Webpages Changed on March 28th

Please note the MDCH Medicaid webpages have changed, please update your internet browser bookmarks and favorites. To access CHAMPS information please visit: www.michigan.gov/mdch >providers >providers > CHAMPS.

Proposed Medicaid Changes

Below are the proposed Policy Bulletins that are posted online. Please review them online at www.michigan.gov/mdch >Providers>>Providers>>Medicaid>>Policy and Forms. Make sure all comments have been submitted by the Comment Due Date below.

Comment Due Date	Notice Number	Subject
April 7, 2008	0805-DSH	Establishment of Outpatient Uncompensated Care DSH Pool